

SUPPLEMENTAL REGISTRATION FORM

* 748
Lobbyist's Registration Number

2. Name Lorillard Tobacco Company

Address P.O. BOX 10529 Greensboro, NC 27404-0529

Business or purpose Manufacturer

☒ New Representation

Does this person pay you? yes

If No, who pays you? _____

☐ Terminated Representation as of _____

3. Name _____

Address _____

Business or purpose _____

☐ New Representation

Does this person pay you? _____

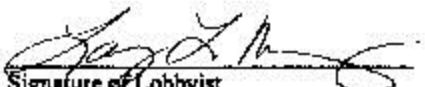
If No, who pays you? _____

☐ Terminated Representation as of _____

State of LOUISIANA

Parish of EAST BATON ROUGE

Before me, the undersigned authority, personally came and appeared Larry L. Murray, who,
after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.


Signature of Lobbyist

Sworn to and subscribed before me on this 18 day of March, 1999.


Notary Public